2018 Current Fiscal Year Report: National Advisory Council on the National Health Service Corps

Report Run Date: 06/05/2019 10:53:38 AM

1. Department or Agency 2. Fiscal Year

Department of Health and Human Services 2018

3b. GSA Committee
3. Committee or Subcommittee

No.

National Advisory Council on the National Health Service

Corps

6. Expected Renewal 7. Expected Term

950

Year? Charter Date Date

No 10/30/1996

4. Is this New During Fiscal 5. Current

8a. Was Terminated During 8b. Specific Termination 8c. Actual Term

FiscalYear? Authority Date

No

9. Agency Recommendation for Next10a. Legislation Req to 10b. Legislation

FiscalYear Terminate? Pending?

Continue Not Applicable Not Applicable

11. Establishment Authority Statutory (Congress Created)

12. Specific Establishment 13. Effective 14. Commitee 14c.

Authority Date Type Presidential?

42 U.S.C. 254j 10/01/1977 Continuing No.

15. Description of Committee National Policy Issue Advisory Board

16a. Total Number of No Reports for this

Reports FiscalYear

17a. Open 2 17b. Closed 0 17c. Partially Closed 0 Other Activities 0 17d. Total 2 Meetings and Dates

PurposeStartEndTo discuss NHSC updates and priorities. This meeting occurred in FY 2018.05/15/2018- 05/15/2018To provide NHSC update and priorities. This meeting occurred in FY 2018.09/17/2018- 09/18/2018

Number of Committee Meetings Listed: 2

	Current FY	Next FY
18a(1). Personnel Pmts to Non-Federal Members	\$6,000.00\$	16,000.00
18a(2). Personnel Pmts to Federal Members	\$0.00	\$0.00
18a(3). Personnel Pmts to Federal Staff	\$53,935.00\$	55,746.00
18a(4). Personnel Pmts to Non-Member Consultants	\$380.10	\$1,500.00
18b(1). Travel and Per Diem to Non-Federal Members	\$809.00\$	16,800.00
18b(2). Travel and Per Diem to Federal Members	\$0.00	\$0.00
18b(3). Travel and Per Diem to Federal Staff	\$0.00	\$0.00

18b(4). Travel and Per Diem to Non-member Consultants\$0.00\$0.0018c. Other(rents, user charges, graphics, printing, mail, etc.)\$2,219.09\$8,876.3618d. Total\$63,343.19\$98,922.3619. Federal Staff Support Years (FTE)2.002.00

20a. How does the Committee accomplish its purpose?

The Council has been providing feedback on the Agency's endeavors to reshape the National Health Service Corps (NHSC) as outlined in HHS Priorities through their face-to-face meetings 2-3 times per year and direct feedback to the NHSC Director, HRSA Administrator, and HHS Secretary. This year has been specifically important to providing feedback on recruitment and retention efforts, data collection efforts, substance use disorders, and telehealth opportunities in the primary care workforce shortage. Meetings have served as an important forum for the Council to meet and discuss these pertinent issues. The Council routinely meets with both community representatives and clinicians to gain first hand understanding of their unique needs and how the NHSC and HPSA designation process either does or does not meet those needs. The result has been policy or legislative recommendations that target limited resources.

20b. How does the Committee balance its membership?

Council members are primary health care professionals with a broad range of experience: as active clinicians, NHSC alumni, participants in health care delivery systems, academics, site administrators, and members of state-based and professional organizations. There is also a continual balance of minority and female members on the Council. Members bring to the Council first-hand and policy level expertise on meeting the needs of the urban and rural underserved through an interdisciplinary model of care that is community responsive and culturally competent. Please note that currently, the Council is waiting for final approval of 10 newly proposed and approved by the HRSA Administrator to be processed and vetted through the HRSA Ethics Office. in addition, a call for two more potential candidates to serve is in process. this will complete the 15-member Council once the proposed 2 members are submitted.

20c. How frequent and relevant are the Committee Meetings?

The Council meets between two to four times per year (face-to-face and virtually) to provide advice and guidance to the NHSC regarding those issues which have an impact on the NHSC's ability to meet its mission. The Council's contribution is crucial to the continuation of the NHSC's effectiveness as the only federal program which directly addresses the problem of maldistribution of clinicians in the nation. It is this problem which is the root cause of underservice and has become increasingly critical due to the rapid changes in the health care environment in recent years. Recruitment and retention efforts

as well as the primary care workforce shortage and implementation of the Affordable Care Act have been important points of discussion this year. The members have shared with senior management the difficulties both have resulted in within the community and shared some strategies for moving forward. The areas of retention and overall communication have been highlighted as key areas for future improvement.

20d. Why can't the advice or information this committee provides be obtained elsewhere?

This Council is the sole source of objective program and policy guidance to the Secretary regarding the function of the NHSC in addressing the needs of the underserved. The NHSC program is a unique program that works directly with individuals rather than institutions, input from those persons directly impacted by the program are critical to its success. In addition, Council members' experience and commitment to the mission provide to the Director of the NHSC, the HRSA Administrator, and the health professional shortage designation program a unique resource that informs their daily operations and long range planning.

20e. Why is it necessary to close and/or partially closed committee meetings?

21. Remarks

No reports required for FY 2018.

Designated Federal Officer

Diane O. Fabiyi-King DFO, NAC on NHSC

Committee Members	Start	End	Occupation	Member Designation
Adamson, Joni 02/28/2015	02/28/2015	02/28/2019	Manager,Recruitment & Workforce Development	Special Government Employee
	02/20/20:0		Missouri Primary Care Assoc	(SGE) Member
Billings, Adrian 09/	09/17/2017	10/31/2020	Chief Medical Officer, Presidio County Health Services	Special Government Employee
	00/11/2011		office inicated officer, i restate county freathir cervices	(SGE) Member
Griffin, Jackie 02/28/2015	02/28/2015	. 02/28/2010	CEO retired	Special Government Employee
	02/20/2013	olo, remed	(SGE) Member	
Kennedy, Wilton 02/28/2015	02/28/2015	02/28/2010	Dir. Clinical Education & Assoc Professor Jefferson	Special Government Employee
	02/20/2019	College of Health Sciences	(SGE) Member	
Malcolm, Joan 02/28/2	02/28/2015	5 02/28/2019	Founder/Owner Bright Smiles Family Dentistry, LLC	Special Government Employee
	02/20/2013			(SGE) Member
Salvador, Darryl 02/28/2015	02/28/2019	Clinical Staff Psychologist	Special Government Employee	
			(SGE) Member	
Stergar, Cindy 09/17/	09/17/2017	10/21/2020	Chief Executive Officer, Butte Community Health	Special Government Employee
	09/11/2011	10/31/2020	Center	(SGE) Member
Witzel, Gwen	09/17/2017	7 10/31/2020	Family Nurse Practitioner, Unity Medical Center	Special Government Employee
			(Critical Access Hospital)	(SGE) Member

Number of Committee Members Listed: 8

Narrative Description

The National Advisory Council (NAC) on NHSC fully supports the agency's mission and strategic plan in many ways. NAC gathers national leaders who are actively providing primary care to the underserved and allows them to advise the NHSC Program and Agency on the optimal way to reach the underserved from their perspective. In addition, NAC fields comments and concerns from NHSC clinicians currently in service to the underserved in order to improve operations on all levels within the federal government.

What are the most significant program outcomes associated with	this committee?
	Checked if Applies
Improvements to health or safety	
Trust in government	
Major policy changes	✓
Advance in scientific research	
Effective grant making	
Improved service delivery	✓
Increased customer satisfaction	✓
Implementation of laws or regulatory requirements	✓
Other	
Outcome Comments	
NA	
What are the cost savings associated with this committee?	
	Checked if Applies
None	
Unable to Determine	✓
Under \$100,000	
\$100,000 - \$500,000	
\$500,001 - \$1,000,000	
\$1,000,001 - \$5,000,000	
\$5,000,001 - \$10,000,000	
Over \$10,000,000	
Cost Savings Other	

Cost Savings Comments

unknown

What is the approximate <u>Number</u> of recommendations produced by this committee for the life of the committee?

61

Number of Recommendations Comments

The Council serves as a forum to identify the priorities for the NHSC and bring forward and anticipate future program issues and concerns. This work is done through ongoing communication with program staff, professional organizations, communities and program participants. The Council functions as a sounding board for proposed policy changes by using the varying levels of expertise represented on the Council to advise on specific program areas. The Council can develop and distribute white papers, briefs and letters of recommendations that clearly state issues and/or concerns relating to the NHSC with specific recommendations for necessary policy revisions. Currently, recommendations are being made to improve program operations and policies as well as to direct future program activities. Recommendations are shared with the Director of the NHSC, the program, and the HRSA Administrator.

What is the approximate <u>Percentage</u> of these recommendations that have been or will be <u>Fully</u> implemented by the agency?

79%

% of Recommendations <u>Fully</u> Implemented Comments Not Applicable

What is the approximate <u>Percentage</u> of these recommendations that have been or will be <u>Partially</u> implemented by the agency?

0%

% of Recommendations $\underline{\text{Partially}}$ Implemented Comments NA

Does the agency provide the committee with feedback regarding actions taken to implement recommendations or advice offered?

Yes	✓	No	Not Applicable	
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Agency Feedback Comments

Any recommendations made by the Council are noted in the minutes and responded to at the Council's next meeting through an update by the Director of the NHSC.

recommendation? **Checked if Applies** Reorganized Priorities ✓ Reallocated resources Issued new regulation Proposed legislation Approved grants or other payments Other **Action Comments** Not Applicable Is the Committee engaged in the review of applications for grants? No **Grant Review Comments** NA How is access provided to the information for the Committee's documentation? **Checked if Applies** Contact DFO ✓ ✓ Online Agency Web Site Online Committee Web Site Online GSA FACA Web Site **Publications**

What other actions has the agency taken as a result of the committee's advice or

Access Comments

N/A

Other